

Tourette's syndrome doesn't keep BC surgeon out of operating room

Tiberius Claudius, the fourth emperor of Rome, is believed to have had Tourette's syndrome (TS). So are poet and writer Samuel Johnson and French author and adventurer André Malraux. People with TS can be found in all walks of professional life — in the arts, business and the sciences. And medicine.

Dr. Mort Doran is one example. A general surgeon in Cranbrook, BC, Doran is also assistant professor of anatomy at the University of Calgary. Every week he flies his own small plane between the two cities. A director of the Tourette Syndrome Foundation of Canada, Doran was in Toronto recently for the foundation's annual meeting, where he gave the audience a personal perspective on what it's like to live with TS.

He describes himself as having mild TS. The most visible symptoms are a shaking of his hands, which he controls during surgery, and a compulsion to constantly twist his watchband. He has vocal tics, which he suppresses in public. He has a compulsion to tap people with his hands, but he controls this in public. "I tap my kids on the head at home," Doran says. "They duck and run away. It's become a game. Sometimes standing behind someone in line at the supermarket, I've come pretty close to touching the person in front of me."

TS never causes him trouble in the operating room. "My hands are perfectly still during surgery. I have no trouble dissecting or doing fine or microscopic work. What I sometimes do if I feel a need to

"My hands are perfectly still during surgery. I have no trouble dissecting or doing fine or microscopic work."

— Dr. Mort Doran

discharge my tics is a modification of my watchband tic. It's something all surgeons do. I stop for a minute or so and adjust my gloves or my gown."

He sometimes has an uncontrollable urge to stoop and brush the pavement with his hand when he's walking down the street, but he has modified this tic to make it appear that he is merely bending to pick up something he dropped. "That makes it more socially acceptable. People don't see it as weird. But, to tell you the truth, I've got to the point where I accept my condition and really don't care what people think any more."

This wasn't always the case. Doran didn't receive a diagnosis of TS until 13 years ago, when he was 37. "I went through medicine, through my surgery residency and into private practice never having heard of TS. I never had the advantage of knowing what I had. It was often difficult and lonely for me growing up. In school, I'd store up my tics and then go into an empty stairwell or some other private place and tap on the walls until I

could appear normal again."

Children who receive an early diagnosis can benefit, says Doran. "They can control the reaction of others by educating them about TS. I do it all the time with patients, colleagues and students. Children should carry information about TS, such as the pamphlets put out by the foundation. When they're teased or ridiculed, they just have to say 'Here, read this. I'll talk to you tomorrow.'

"The biggest source of stress is suppressing the tics and hiding the condition. When you don't have to, half the battle is over. When kids are given permission to be open about their condition, life automatically becomes better. It's still not easy, but it's not the end of the world."

Doran has tried medications, but in the end decided he'd rather live with his tics than put up with disturbing side effects. His advice to parents about drugs: "It's always worth a try. What doesn't work for one person might work well in another. The really important thing is to identify what bothers the child most. Often it's not the tics, but ridicule, which can be dealt with by being up front with peers and teachers. For me, the most difficult thing is pressure to do several things at once. If that's a child's biggest problem, he can be taught how to manage or avoid these stressful situations. I don't think drugs can do anything for that. By identifying the most bothersome problems, you can get the patient to deal with that with a minimum amount of medication and get them to accept the tics they do have."